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## 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

| NAME OF COMMITTEE IN FULL     Citizens for Eleanor Holmes Norton |                                      |                                       | 7  |                              |  |
|--|--------------------------------------|---------------------------------------|--|------------------------------|--|
| ADDRESS (number and street) 2201 Wisconsin Avenue, NW Suite 320  |                                      |                                       | 1  |                              |  |
| CITY, STATE, and ZIP CODE  |                                      |                                       | 1  |                              |  |
| Washington   | DC 2000                              | )7                                    |  |                              |  |
| 2. NAME OF CANDIDATE   | 3. OFFICE SOUGHT (St                 | 3. OFFICE SOUGHT (State and District) |  | 4. FEC IDENTIFICATION NUMBER |  |
| Eleanor Holmes Norton  | House DC                             |                                       | C00244335  |                              |  |
| 5. IS THIS AN AMENDMENT? NO, THIS IS A NEW FILING                | YES, IT AMENDS THE NOTICE FILED ON   |                                       | ////   |                              |  |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE                       | Name of Employer                     |                                       | Date (month, day, year)  | Amount                       |  |
| Patrice R. Miller  | N/A                                  | N/A                                   |  |                              |  |
|  |                                      |                                       | 10/27/2012   | 2000.00                      |  |
| 3249 N Street, NW  |                                      |                                       |  |                              |  |
|  | Transaction ID : F6.12006 Occupation |                                       |  |                              |  |
| Washington DC 20007  | Homemaker                            |                                       |  |                              |  |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE                       | Name of Employer                     |                                       | Date (month,   | Amount                       |  |
| E Michael Vergason   |                                      | M Vergason Landscape Architect        |  |                              |  |
| L Michael Vergason   | W Vergason Landscape Architect       |                                       | 10/27/2012   | 1000.00                      |  |
| 4517 16th St N  Arlington VA 22207                               |                                      |                                       | 10/21/2012   | 1000.00                      |  |
|  | Transaction ID : F6.12005            |                                       |  |                              |  |
|  | Occupation                           |                                       |  |                              |  |
| Architec   |                                      |                                       |  |                              |  |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE                       | Name of Employer                     |                                       | Date (month,<br>day, year)   | Amount                       |  |
|  | Occupation                           |                                       | _  |                              |  |
|  | Occupation                           |                                       |  |                              |  |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE                       | Name of Employer                     | Name of Employer                      |  | Amount                       |  |
|  |                                      |                                       | day, year)   |                              |  |
|  | Occupation                           | Occupation                            |  |                              |  |
|  |                                      |                                       |  |                              |  |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE                       | Name of Employer                     | Name of Employer                      |  | Amount                       |  |
|  | Occupation                           |                                       |  |                              |  |
|  |                                      |                                       |  |                              |  |
| SIGNATURE (optional) William Simons                              | [Electronically Filed]               |                                       | For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100 |                              |  |

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